MOVING TO A PERSON CENTERED APPROACH TO SERVICE DELIVERY

Susan Fox

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Today's Goals

- ☐ Develop a shared understanding of what we mean by a "person-centered system"
- ☐ Develop a shared understanding of "person-centered planning"
- ☐ Discuss the differences between person-centered and traditional service planning and delivery
- ☐ Identify examples of how the Colorado service systems are and are not person-centered
- ☐ Identify barriers and opportunities for person centered thinking in Colorado

Federal Policy Context

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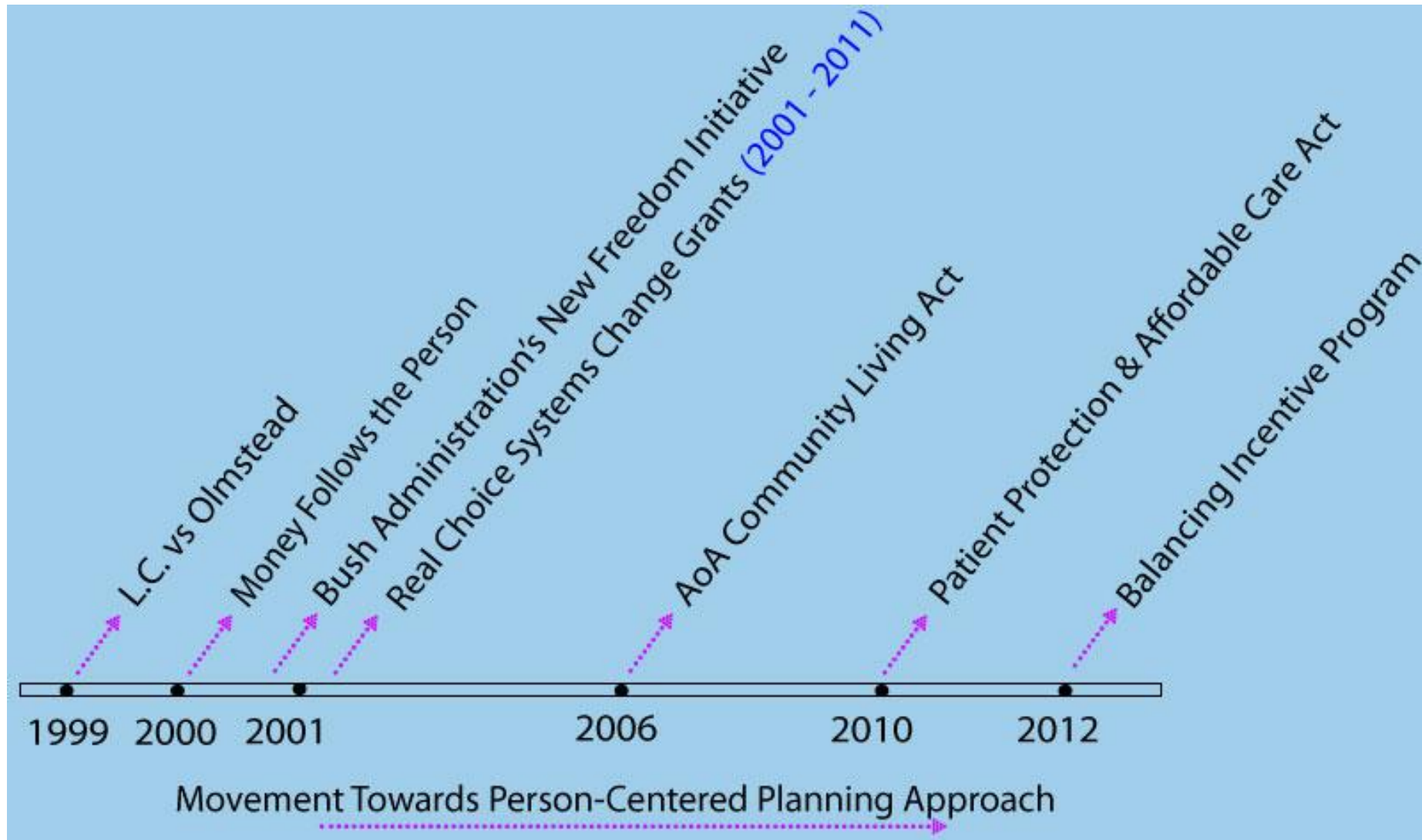
New Freedom Initiative

"to help ensure that all Americans have the opportunity to live close to their families and friends, to live more independently, to engage in productive employment, and to participate in community life."

- President George W. Bush, February, 2001

IN ORDER TO TRANSFORM THE LONG TERM SERVICES AND SUPPORTS SYSTEM EFFECTIVELY, WE MUST FIRST CREATE A PERSON-CENTERED CULTURE.
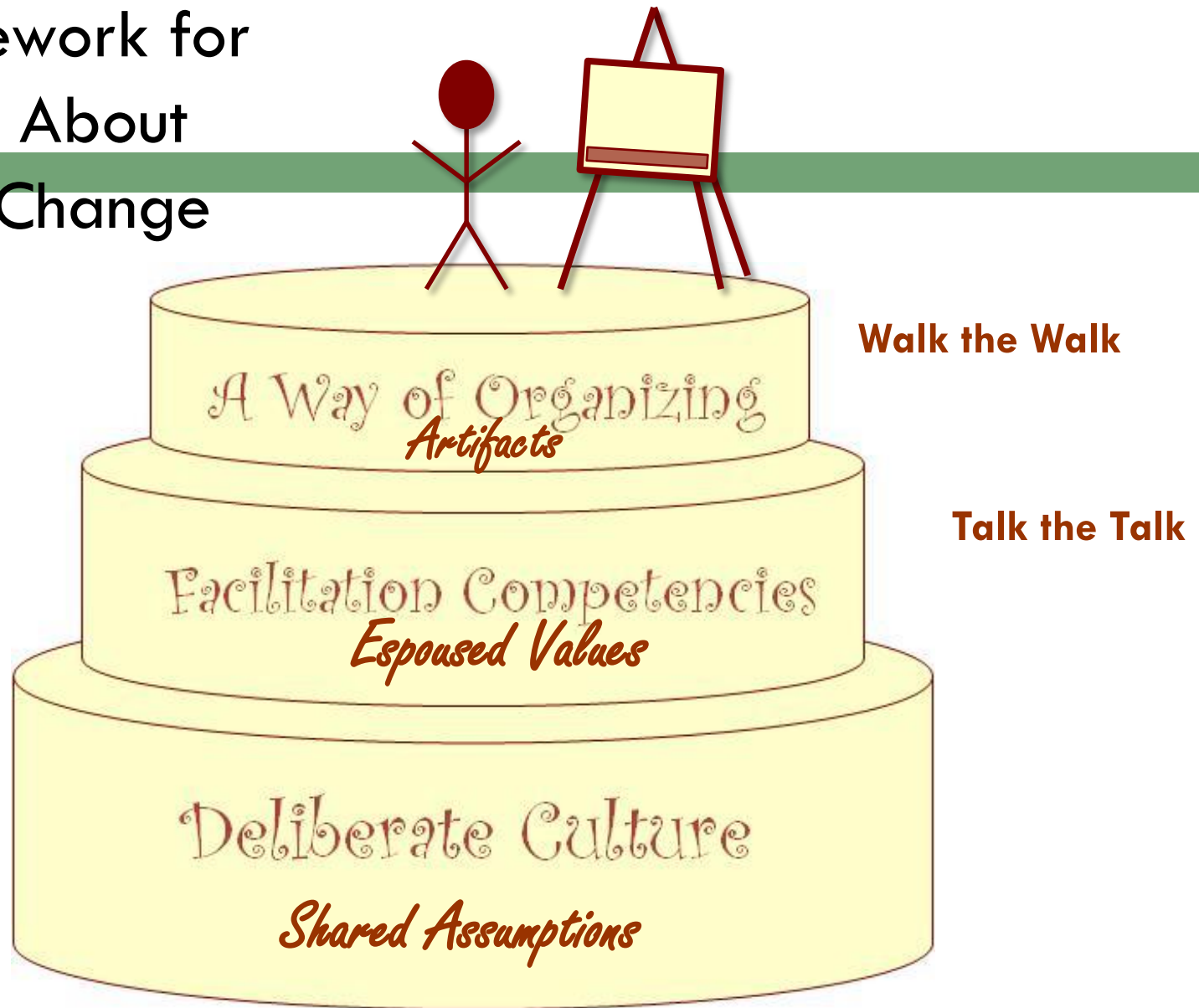
Culture

"It is in the psychological process that culture has its ultimate power. Culture as a set of basic assumptions defines for us what to pay attention to, what things mean, and what actions to take in various kinds of situations."

- Schein (2004)

A Framework for Thinking About Culture Change

A Way of Organizing
Artifacts

Walk the Walk

Facilitation Competencies
Espoused Values

Talk the Talk

Deliberate Culture
Shared Assumptions

Cotton & Fox, 2011

Person-Centered System

□ The focus of a person-centered system is on **the individual**, their **strengths,** and their **network of family and community support** in developing a flexible and cost effective plan to allow the individual maximum **choice and control** over the supports they need to live in the community.

□ A person-centered system **respects and responds to individual needs, goals and values.** Within a person-centered system, individuals and providers work in full **partnership** to guarantee that each **person's values, experiences, and knowledge drive the creation of an individualized plan as well as the delivery of services.**

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Principles of Person Centered Thinking

1. Individuals and their families are invited, welcomed, and supported as full participants in service planning and decision making.

2. Planning is responsive to the individual and services are flexibly designed based on the individual's needs, not on a menu of services.

3. Services are designed, scheduled, and delivered to meet the needs and preferences of the individual, not the service provider.

4. There is a commitment to person centered thinking at every level of the system (direct service, case management, program management, organizational leaders, system leaders).

5. The system is committed to excellence and quality improvement through:
    affirming individual rights;
    protection from fraud, neglect and abuse; and
    being accessible, accountable and responsive to the individual.

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Person Centered Planning

"Person centered planning is a process for developing an individual support plan that is directed by the person and/or his or her representative and identifies the person's preferences, strengths, capacities, needs, and desired outcomes or goals."

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Purpose of PCP

Person-Centered Planning provides a clear structure for shifting the focus of planning and problem solving from program menus and human service solutions, to the broader perspective of individual's and family's lives and informal and community resources. It is a user-friendly process that builds trust and is conducive to cooperation and creativity.

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PERSON-CENTERED PLANNING ≠ PERSON-CENTERED SYSTEM

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Person-Centered Approaches Across Systems

- Developmental Disabilities
  - Self Determination
  - Person-Centered Planning
  - Individual/Family Direction
- Mental Health
  - Recovery
- Physical Disabilities/Independent Living Movement
  - Consumer Direction
- Medical
  - Informed Consent
  - Informed Decision Making/Shared Decision Making
  - Hospice
- Aging
  - Person-Centered Planning
  - Participant Directed Services (Self Direction/Consumer Direction/etc)
  - Options Counseling
  - Nursing Facilities Culture Change
- Children's Services
  - Family Directed Services

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Historical Approaches to Planning & Service Delivery

- The "system" and its agents have traditionally determined what programs will be put in place, and then people are placed or fit into those programs

- Programs have traditionally been developed to meet generalized area of need, rather than meeting the needs of individuals

- Lack of Coordination of Funding: Medicare, Medicaid, Home and Community Based Services Waivers, Commercial Insurance, Older Americans Act (Administration on Aging), Social Security, Private Pay, Community and Faith Based Organizations.

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Traditional Support Planning vs. Person-Centered Planning

Traditional Support Planning	Person-Centered Planning
Decisions are to be made by "consensus" of a planning team that typically consists primarily of staff and professionals and are driven by medical needs	The participant drives decisions and invites people who they feel have important contributions to make, often including family, friends, community members and trusted allies from the service system
Professional conduct an assessment and determine needs	Focus of planning is defined by the desired outcomes of the participant
Focus of planning is primarily defined by a menu of service options that are offered under the HCBC waiver or other programs. Natural supports are sometimes used to augment programmatic supports	Informal and community supports are identified first. Programmatic supports are used to augment natural supports
Planning occurs periodically during annual meetings or isolated problem solving events	Planning occurs as a process that evolves over time
Attention is focused on problems and "fixing"	Attention is focused on strengths and "building"

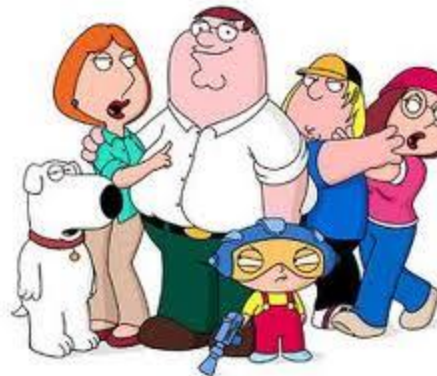Susan Fox, 2013

Traditional vs. Person-Centered

Explore preferences, strengths, capacities, needs, and desired outcomes

The participant drives decisions

Who can help?
Family? Friend?

A Balancing Act

Person-centered Planning

- Assess/Build Trust
  - Timeline
  - Relationships Map
- Explore Options
  - Routines Schedule
  - Preferences Map
- Informed Decision Making
  - Pros and Cons
  - Priorities
- Commit To Services and Supports
  - Back Up Support
  - Responsibilities Chart

System Requirements

- Medical necessity
- Assessment
- Intake
- Plan of care
- Service Arrangements
- Quality Monitoring
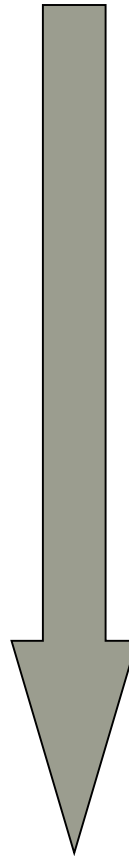
Individual Outcomes and Goals

Applying Person Centered Approaches Across Roles within an Organization

Function/ Role	Information and Referral Specialist Front Desk Receptionist	Assessment/ Intake Nurse Long Term Support Counselor	Options Counseling Case Management	Service Planning	Ongoing care coordination
Person Centered Approach	Person-Centered Approach and Questioning	Person-Centered Inquiry (Use inquiry PCP tools as appropriate	Informed Decision Making (Use decision making PCP tools as appropriate)	Person-Centered Goals and Strategies (Person's goals, not professional's or service system's goals)	Ongoing assessment of needs, quality of services, monitoring, and refinement

Cotton & Fox, 2011

Options Counseling

The AoA is working to define Options Counseling as part of the criteria for a fully functioning ADRC. The definition looks a lot like "person-centered planning":

Options counseling is the umbrella process that includes the following functions:

- Identification of the persons strengths, values, needs, and preferences
- Service plan development
- Enrollment in consumer directed programs
- Enrollment in publicly funded programs
- Service initiation
- On-going assistance and follow-up

Urban Myths Related to Person Centered Planning

- PCP means people get whatever they want, regardless of cost or feasibility

- PCP is a way to relieve providers of responsibility for health and safety

- PCP is a way for states to cut funding to individuals

- PCP means people can choose service options that compromise their health and safety

- We already do PCP

- **What are your fears about PCP?**

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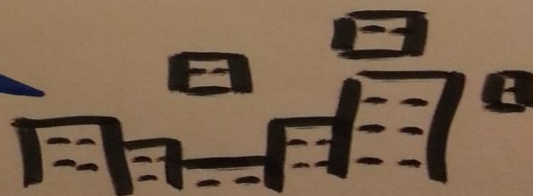
Small Group Discussion

- **First Break Out Group:**
  - Identify ways in which Colorado's current systems are and are not person-centered
- **Second Break Out Group:**
  - Discuss barriers and opportunities to moving to a more person-centered system

Identify ways in which Colorado's current systems are and are not person-centered

What is Working:

- Existing Strengths, Competencies, Best Practices, Capacities, etc.

What is **Not** Working:

- Limiting Attitudes, Practices, Politics, Issues, Concerns, Regulations, Policies, etc.

Discuss barriers and opportunities to moving to a more person-centered system

Opportunities:

- New Initiatives, Changing Attitudes, Political Climate, Best Practices, Capacities, etc.

Barriers:

- Limiting Attitudes, Practices, Politics, Issues, Concerns, Funding, Regulations, etc.

Contact

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